

## **Janesville Recreation Division**



## 2022 Adult Softball Registration Dawson Softball Complex



All leagues are slow-pitch

Please of	check the night/league you	r team would prefer	(1st & 2nd c	hoice).
Sunday ( ) Men's	<b>Monday</b> ()Men's Church League	Thursday ( ) Women's		y Co-Rec ( ) Upper
√( ) RETURNIN	IG TEAM ( ) NEW TEAM	M: Referred By (If ar	ny):	
TEAM NAME:				
TEAM MANAGE	₹:	PHONE: Home-	C	Cell-
MANAGER'S AD	DRESS:		<u></u>	
MANAGER E-MA	Street AIL (for sending team schedul	City les & cancellations)_	Zip	
If you had a differe	nt team name or different mana	ger last year, please inc	dicate below:	
COMMENTS: (Me	ention any changes in team status or sp	pecial requests for considerat	ion when setting	up the leagues.)
Fee Calculation:	Team Fee* (up to 20 play	ers)	\$420	
	Late Fee (if paying after	deadline)	\$50	
	12-Week Season			
			Total Due	

Return this form with the registration fees on or before the deadline of **April 8, 2022**. Checks should be payable to City of Janesville. **Registration is not complete without this form, a completed roster** form (on back) with names/addresses/phone # and fees submitted by the deadline to the Parks & Recreation Office, 18 N. Jackson St., P.O. Box 5005, Janesville, WI 53547-5005.

Roster on Back→

## **TEAM ROSTER REGISTRATION**

TEAM \_\_\_\_\_\_ LEAGUE \_\_\_\_\_NIGHT\_\_\_\_\_

We, the players of this team, agree to abide by the Rules and Guidelines for the Adult Softball League and the Janesville Recreation Division.

	Name	Mailing Address, City, Zip	Phone
1.	(Mgr.)		Home: Work:
2.			
3.			
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As the manager of this team, I understand that I am responsible for the eligibility of the players on this team. I have completely checked the eligibility of all players and to my knowledge the players of this team are in compliance with

Date

the Eligibility Rules.

Manager's Signature